

EMAP Assessor Guide

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Emergency Management Accreditation Program (EMAP)

Assessor Guide

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Preface

Emergency Management Accreditation Program (EMAP)

The Emergency Management Accreditation Program (EMAP) is a voluntary accreditation process for state, territorial, tribal, and local government emergency management programs. This document is intended to serve as a training tool and reference for individuals serving or considering serving as an assessor as part of the EMAP process.

Guiding Principles for Assessors

It is important to bear in mind some guiding principles for application of standards to any program. Although the *EMAP Standard* has been developed by consensus process, the standards are dynamic and are subject to review, modification, and revision by the EMAP Commission in accordance with established procedures.

The *EMAP Standard* is intended to define ***what*** a quality emergency management program is rather than ***how*** any particular function or activity is conducted. The standards reflect best practices in emergency management and can be expected to continue to improve and advance the state of the profession. The standards are intended to be achievable within reasonable resource constraints, thereby encouraging program managers to seek accreditation and serving as a catalyst for continuous improvement.

Section I. Introduction

Purpose

The purpose of this Assessor Guide is to prepare the EMAP assessor team to perform an assessment of a candidate's emergency management program. That assessment serves as the basis for determining compliance with the *EMAP Standard*.

This guide can be used as a reference, as a training aid, and a field guide to aid the assessor team in planning and conducting a successful assessment. The guide includes information on collection, review, and verification of documentation and preparation of the assessment report to the commission.

Objectives

The objective of the Assessor Guide is to facilitate the assessment process for the assessor team by prescribing a method for efficiently determining the compliance of a candidate program while maintaining consistency and fairness for all EMAP applicants. Objectivity is essential, and all efforts will be made to eliminate bias and foster positive professional interaction between assessors and the candidate program.

Accreditation

Accreditation is a voluntary, non-governmental process of self-study, documentation, and external review designed to evaluate programs based on a national standard, thereby publicly recognizing quality and accountability and encouraging continuous improvement.

Scope and Benefits

The accreditation process is intended to promote consistent quality in emergency management programs at the state and local levels and thus provide tangible benefit to the community and the public infrastructure these programs serve. Another expected benefit is increased professionalism in the conduct of emergency management functions. Accreditation is focused on the program rather than the department/agency in recognition of the complex relationship between the emergency management organization and other organizations that contribute vital pieces of an effective emergency management program.

Peer Review

Perhaps the most meaningful feedback that can be given is an objective review by one's peers. Structured peer review is an important feature of the accreditation process. Through external review by other emergency managers, the process measures the degree to which a program has achieved compliance with the criteria in the *EMAP Standard*. Objective review is provided through systematic inspection of program documentation by a team of assessors from outside of the candidate's jurisdiction. This manual is written for these objective reviewers or assessors. *See Qualifications, p. 8.*

Section II. Overview of the Accreditation Process

This section summarizes the EMAP accreditation process and the role of the assessor team in that process. More detail can be found in the *Accreditation Process Guide*.

The accreditation process includes the following phases:

- 1) Registration
- 2) Self-Assessment
- 3) Application
- 4) On-site Assessment and Report
- 5) Committee Review
- 6) Accreditation Decision by Commission
- 7) Accreditation Maintenance
- 8) Re-accreditation

Anyone may request and obtain information on accreditation from EMAP. The information package contains information about the objectives of the EMAP, general information about the standards, and how to proceed with registration and application.

1. Registration

After reviewing the information package, the emergency management program may register with EMAP to receive an EMAP application package. The program registers by completing a form on paper or online at www.emaponline.org and paying a \$125 fee. The application package contains materials needed to prepare to meet accreditation requirements and to apply for accreditation, including the *EMAP Standard*, *Candidate's Guide to Accreditation*, a user account for the EMAP Online Assessment Tool, and other information.

2. Self-Assessment

The applicant begins the process of self-assessment by selecting an accreditation/assessment manager to coordinate the administrative aspects of performing the self-assessment, obtaining and documenting evidence of compliance with the *EMAP Standard*, and handling scheduling and oversight activities.

The candidate program conducts its self-assessment against the *EMAP Standard* using the EMAP Online Assessment Tool and compiles its documentation to support compliance with each standard. Candidate programs are instructed to prepare and organize documentation materials to aid assessors in quickly locating the right evidence of compliance and in identifying questions that need to be resolved during the on-site assessment.

3. Application

To apply for accreditation, a program submits an application form, appropriate application fee, and a Notice of Intent to seek accreditation. A program may apply for accreditation any time after registration and before requesting on-site assessment.

The program completes a Notice of Intent to seek accreditation, signed by the chief executive (e.g., governor, county manager, mayor) of the governmental entity seeking program accreditation. Once the application, Notice of Intent, and application fee are received, the program is considered an accreditation candidate.

For state/territorial programs participating in baseline assessment, the program has up to 30 days after it receives its assessment report to determine if it will use the baseline assessment to seek accreditation. If it chooses to do so, the program must notify EMAP, provide a Notice of Intent to seek accreditation, and pay the appropriate application fee.

4. On-Site Assessment

The on-site assessment is the most important aspect of the accreditation process as it gathers and verifies information regarding the compliance of the candidate with the *EMAP Standard*. Much of the work conducted by the candidate and the assessor team is geared to the brief period of time that they are engaged in intensive review of the candidate program and verification of compliance.

When a candidate program has completed its self-assessment, it sends EMAP a Request for On-Site Assessment and electronically submits its completed Online Assessment Tool. In the online tool, which serve as electronic PCRs, the program lists documentation it will provide as evidence of compliance with each standard as well as an explanation for how each proof supports or demonstrates compliance. EMAP reviews self-assessment materials, and if they appear to be complete, begins planning for the on-site assessment. If the package appears incomplete, the candidate will be contacted by EMAP to discuss options for proceeding.

Once the candidate program is ready for on-site assessment, EMAP contacts the accreditation manager with information about possible dates and general schedule for the on-site assessment, the composition of the team, and an estimate of the on-site assessment costs, which will be paid by the candidate prior to the on-site assessment. The candidate pays the cost estimate, reviews the team composition for potential conflicts, and coordinates the details of the on-site assessment.

An assessor team is selected by EMAP and is given access to the self-assessment results, the on-site schedule or plan, and any read-ahead materials provided by the candidate. When the team arrives on-site, an orientation is provided by the candidate; the accreditation manager coordinates on-site activities with the assessor team leader.

The team completes its work, providing opportunity to the candidate before completing the review to provide additional information in areas where possible non-compliance is noted. The team reports its findings in an exit briefing with the accreditation manager, chief executive or designee prior to departure from the site. *For more detail, see Conducting an On-Site Assessment, page 11.*

5. Committee Review

The assessor team provides its findings to the Program Review Committee in an assessment report that includes the team's findings as to compliance with references to key supporting documentation. EMAP provides a copy of the report to the accreditation candidate.

The assessor team will provide the opportunity for the accreditation candidate to correct deficiencies and/or submit additional evidence of compliance within 30 days after the last day of the on-site assessment. Should an additional on-site assessment to determine compliance be required, costs would be born by the accreditation candidate.

A copy of the assessment report is provided to the accreditation candidate in advance of the Program Review Committee meeting. The accreditation candidate may prepare a response or comments regarding the assessment report to be included in materials to be reviewed by the Program Review Committee. The accreditation candidate is offered the opportunity to attend a portion of the Program Review Committee meeting at which its accreditation application will be considered. Candidate program representatives will be excused from the deliberation portion of Program Review Committee meetings. The committee's recommendation regarding accreditation status will be decided by majority vote. The Program Review Committee renders one of the following recommendations for an initial accreditation application:

- Accredited
- Conditionally Accredited
- Accreditation Denied

6. Accreditation Decision

The Program Review Committee's recommendation is forwarded to the EMAP Commission's next meeting for action. The commission's decision will be determined by majority vote. If the candidate program is accredited, the commission provides a letter and certificate of accreditation and other visibility materials. Conditional accreditation may be granted where there are areas of non-compliance that can be corrected within a short period of time, which will be specified by the commission and which cannot exceed nine (9) months. (The program would have submitted a plan for correcting noncompliant areas before its report went before the Program Review Committee.) If accreditation is denied, the candidate will be informed of the reasons for this decision. *See Step 7B(2) of the Accreditation Process Guide.*

7. Accreditation Maintenance

After accreditation is achieved, accredited programs are expected to maintain compliance with the standards and keep proofs of compliance up to date. Each accredited program will be required to complete and file with the Commission an annual report. An accredited program must operate in compliance with the standards

and strive to continually improve its level of compliance. Accreditation is valid for a period of five (5) years from issuance of the accreditation certificate, after which the entity may apply for re-accreditation.

8. Reaccreditation

The reaccreditation process involves the same steps as the original application process. Reaccreditation will call for documentation and compliance information of the program performance during the maintenance period. If the accredited program no longer chooses to maintain accreditation, it may allow its accreditation to lapse following the five-year period of maintenance.

Section III. Roles and Responsibilities

This section describes the roles and responsibilities of EMAP Commission and committees, assessor team, assessor team leader, accreditation candidate, and the accreditation manager in the assessment process.

Commission and Committees

The EMAP Commission's role in an assessment begins with the decision that an applicant is ready for an on-site assessment. Once the appropriate application process has been completed and approved, the Assessment Committee will begin preparing for the on-site assessment phase.

The Assessment Committee reviews and recommends all products and policies involved in selecting, training and supporting assessors, team leaders, accreditation managers, and the assessment process. The Assessment Committee is responsible for providing on-site assessment materials, assessor training and education activities as needed by the assessors.

Assessor Team

Assessors are the most important members of the accreditation process as standard bearers of the emergency management profession and as representatives of the commission on-site. Assessors must exemplify the professionalism that the EMAP seeks to foster. They must be beyond reproach and maintain a high level of objectivity, impartiality and professionalism in all that they do. They must be skilled at performing their responsibilities in a thorough, professional, and non-confrontational manner. Assessors must abide by the EMAP Assessor Code of Conduct (*see Section IX.*).

The assessor cadre is a group of emergency management professionals who act as representatives of the EMAP Commission and as such are bound by all rules, policies and procedures that apply to commission members, such as travel policies, expenses, and other guidelines.

Assessors will be selected from the cadre of assessors who have been trained and tested for assessment responsibilities. Once an assessor has been assigned to an assessment project, he or she will be responsible to the commission through the assessor team leader for all actions in conjunction with that project. Assessors will have responsibilities leading up to, during, and following an on-site assessment assigned by EMAP and the assessor team leader.

When assessors receive assignments, they will be given information about the program candidate by EMAP and will begin to prepare for the on-site assessment. Assessors are expected to hold the target on-site schedule dates free from conflict and remain aware of potential obstacles to performance of their duties.

Assessor Team Leader

The assessor team leader assigned by EMAP will be the conduit for communications between EMAP, the assessor team, and the accreditation manager. The assessor team leader receives from EMAP all information needed to begin work and will contact the accreditation manager and discuss dates, schedules, and logistic requirements. The assessment schedule should include an entrance briefing and exit briefing with the executive of the program.

The assessor team leader will review the information provided on each assessor assigned to the team and make contact to ensure that they are aware of the schedule, the requirements and have all available information provided about the candidate program. The assessor team leader also will schedule any pre-on-site assessment activities with the team.

Accreditation Candidate

Any state or local government organization with an emergency management program seeking accreditation that has completed and submitted the self-assessment results, application fees, and the Notice of Intent to EMAP is considered an accreditation candidate.

Accreditation Manager

The accreditation manager is selected by the accreditation candidate to coordinate the administrative aspects of performing the self-assessment, obtaining and documenting evidence of compliance with the *EMAP Standard* and other scheduling and oversight activities. The accreditation manager is the lead candidate contact with the assessor team during the on-site assessment. He or she is responsible for organizing the accreditation candidate's efforts regarding assessment and accreditation.

Section IV. Selecting and Training Assessors

This section describes how assessors will be selected and how they will receive testing and EMAP assessor training prior to being assigned as a member of an assessor team.

Assessor Cadre

The EMAP Commission and its Assessment Committee maintain a cadre of individuals trained and certified to perform assessments of state and local emergency management programs. The cadre will be available to the committee as a source of assessors from which assessor teams could be assembled and scheduled to complete assessments on an as-needed basis. Assessors must adhere to the EMAP Assessor Code of Conduct (*see Section IX*).

Qualifications

Becoming a certified EMAP assessor involves a multi-stage process beginning with completion of an application including identification of areas of expertise, training, and satisfactory completion of an assessor certification test. The EMAP Commission invites volunteers and nominations of individuals from state and local emergency management to apply and serve as EMAP assessors.

The following qualifications are a prerequisite for application as an EMAP assessor.

- A minimum of five years of experience in an emergency management position in a state or local emergency management organization;*
- Experience in at least one actual emergency operation requiring implementation of operational response procedures;
- Participation in at least one emergency operation, training or exercise event in the last calendar year;
- Up-to-date knowledge of the principles of comprehensive emergency management;
- Able to provide two references regarding his or her qualifications from an emergency management division director or equivalent; and
- Have no conflict of interest as regards any aspect of EMAP that might prevent objective review and assessment of a candidate program. Must be able and willing to serve as a neutral observer.

* Individuals who have at least three years of experience in an emergency management position in state/local government but who do not have five years may submit their credentials to the EMAP Assessment Committee for review and approval to participate in assessor training and serve as an assessor.

Training

All assessors will be required to attend and complete EMAP assessor training and be accepted by EMAP prior to participating in an assessment. Assessor training is conducted to ensure that all members of the assessor cadre uniformly and

consistently administer the principles of EMAP in all assessments. Training addresses means of validating compliance with EMAP standards and appropriate interaction with candidate program personnel during planning, assessment, and post-assessment activities.

Assessor training is not intended to provide assessors education in the principles of emergency management, as they are expected to already possess that knowledge as a pre-requisite to assessor training.

Testing and Certification

Assessors will be given a written test at the end of the training. Those who successfully complete the assessor training and examination are provided forms to request they be part of the assessor cadre, in which they are asked to commit to serving on at least one assessor team in a one-year period. Assessors are then contacted by EMAP to determine their availability to serve on assessor teams.

After an assessor has served on at least one assessment, he or she will be certified as an EMAP assessor. Certifications will be valid for one (1) year, after which assessors may be required to attend refresher training and renew their certificates. Certification as an EMAP assessor may not be used to represent any higher level of qualification or for other than EMAP assessor qualification purposes.

Section V. Planning an On-site Assessment

This section describes how EMAP plans an on-site assessment, from the point of notification that the team has been selected through the initial briefings, on-site assessment, and assessment report.

Planning and Scheduling

Formal planning for an on-site assessment does not begin until the self-assessment phase has been completed. At that point, the applicant has submitted its self-assessment results by submitting its Online Assessment Tool results and has notified EMAP that it is ready for on-site assessment. EMAP reviews submissions and contacts the candidate to coordinate the scheduling of the on-site assessment. A satisfactory date will be selected that allows the candidate team to be fully available and responsive to the assessor team. Once the date has been set, EMAP will send a letter to the candidate confirming the dates, times, locations, and participating individuals in the assessment.

Team Preparation

EMAP, through staff and the Assessment Committee, sets the number of assessors on the team and selects candidates from the assessor cadre for the team. The assessor team leader and a majority of team members for a state/territorial assessment will be a member of the assessor cadre who is or has been in a state/territorial emergency management role. Similarly, the assessor team leader and a majority of team members for a local assessment will be an emergency manager with local (city, county, township, etc.) experience. The candidate reviews the qualifications of the proposed members of the assessor team and must notify EMAP within 14 days if there are concerns about potential conflict of interest. EMAP will estimate costs for the on-site assessment and will provide an invoice to the candidate. Payment must be received no less than 21 days before the scheduled on-site assessment. Costs include travel, accommodations, meal, and administrative costs of the assessor team. (The amount paid will be reconciled with actual costs after the site assessment; a refund or additional charges may result.)

During the planning phase, EMAP staff will review the assessment process with the candidate and the assessor team to outline the degree of documentation required, the process of review and the responsibilities during an on-site assessment. Questions regarding assembly and organization of documentation by the candidate should be addressed at this time. Recommended practices and methods for performing this preparation are contained in the *EMAP Candidate's Guide to Accreditation*, which is part of the EMAP registration packet and is available to registered programs online at www.emaponline.org.

Section VI. Conducting an On-site Assessment

This section describes a typical chronology of an on-site assessment. Although variations to this chronology will occur, it is recommended that the assessor team follow a similar process to maintain continuity and enhance organization.

Prior to traveling to the site, the assessor team leader convenes the assessor team via teleconference and conducts an overview briefing of the requirements of the on-site assessment. The assessor team leader is the primary point of contact between the assessor team and the candidate staff. The assessor team leader, EMAP staff, and the accreditation manager will coordinate the travel and on-site plans of the team.

The assessor team leader will manage the team schedule and activities to ensure that the team completes its work on time and with quality recorded findings. The assessor team leader and/or EMAP staff will assign specific work to each assessor in advance and may also conduct portions of the assessment. Assessors will perform assignments as given to them by the assessor team leader and will assist to help ensure that the assessment is conducted efficiently and effectively.

Assessor Assignments and Second Reads

Usually, each assessor is assigned several sections of the *EMAP Standard* for which he or she will serve as the primary assessor. For some sections, two assessors may be assigned because of the volume or complexity of the standards or materials expected for that section. For standards sections where one assessor is assigned as the primary reviewer, another assessor will be assigned as the “second read” on that section of standards. Second reads on each standard can be conducted in whatever manner works best for the team, as directed by the team leader. The purpose of second reads is to provide for more than just one assessor to review the documentation and compliance issues on each standard.

Assessment Chronology

The duration of the assessment will depend on the size and complexity of the candidate program. However, the assessor team should complete most on-site assessments within five (5) working days including visits to other locations or offices required as part of the assessment. The assessment should unfold generally according to the following chronology.

Travel and Reception Day

Assessors travel to the candidate’s jurisdiction. If the assessors are located near the candidate's site, the travel day may be combined with orientation and initial meetings described below.

An informal meeting, orientation and introduction of the respective team members may be arranged by the assessor team leader. This is an opportunity for team members to meet briefly and build rapport prior to initiating the assessment process. Discussions could include the respective

roles of the participants in the assessment and other basic administrative matters. This information meeting also allows the assessor team leader to outline the philosophy of the EMAP Commission regarding the conduct of assessments and objectives of accreditation.

Day One: Orientation and Assessment Begins (Monday)

An orientation meeting will be conducted between the assessor team and the accreditation manager and key staff to outline the EMAP Process. The intent of this meeting is to minimize the need for continuing direct involvement of the candidate's staff while the assessor team performs its assessment and to ensure that the assessor team has easy access to needed information.

The assessor team will arrive at the location of the candidate for general orientation and a tour of the facilities. The purpose of the tour is for assessor team members to become familiar with the area in which they will be conducting the assessment and to gain initial impressions of the facility and the location of employees with whom they will interact. During this tour, the assessor team will be shown the location of accreditation files and other resources to be used in the assessment.

During this initial tour, the assessor team will be shown the area set aside as a working area for performing the assessment along with any supporting equipment or administrative support. The assessor team will review the arrangements and note any additional needs to support its work. The accreditation manager must see that the assessor team is provided a roster of employees, phone numbers and outside agency points of contact appropriate for interviews and other functions.

The rest of day one will be spent reviewing files, conducting interviews and observing the program elements necessary to determine compliance with EMAP standards.

At times as appropriate during the assessment, assessors may focus on program interface points in agencies, departments, or organizations other than the emergency management agency, such as other outside program points of contact, members of the emergency management program committee or other agencies with emergency responsibilities not under the direct report of the emergency management program manager. Ideally, these types of interactions will be scheduled in advance to ensure that contacts can be available. It also may be appropriate for some or all of the assessor team to visit satellite facilities as needed to document compliance.

Day Two and Subsequent Days: Assessment Continues

On day two and following, review and verification work by the assessor team continues. Each day, assessors should communicate to the assessor

team leader, before or during the team meeting each day, any issues related to documentation, verifying information, or cooperation so that concerns about process can be addressed by the accreditation manager. The assessor team leader should meet with the accreditation manager and possibly chief executive or emergency management program director to review status and any process problems. The assessor team leader will lead this interview. Recognizing that the chief executive (governor, mayor, county commission chair, etc.) is the signatory for the accreditation application and with whom it may be difficult to schedule a meeting, planning for this type of meeting should occur early in on-site assessment planning to ensure that the chief executive is provided an opportunity to participate.

During this meeting, the assessor team leader should provide a quick review of the EMAP objectives, process and general status of the assessment thus far. The assessor team leader should provide feedback about how the assessment process is going to allow the chief executive or accreditation manager an opportunity to consult with candidate program staff, provide additional support resources if needed, and/or provide additional information.

During this meeting the assessor team leader should also address any public information aspects of the assessment or EMAP generally so that any comments made by representatives of the program are consistent with EMAP objectives.

The assessor team will complete its review of program files during this time and will record findings and assemble documentation for the exit briefing.

The assessor team leader will ensure that the accreditation manager has received feedback on how the process is going and has been given any requirements from the assessors for additional information, clarification or documentation in the respective *EMAP Standard* areas. If any additional information or documents are needed for the assessment report, the assessor team should advise the accreditation manager, preferably in writing, by this time.

Final Day

The final day will include a trial, or practice exit briefing by the assessor team, and then delivery of the exit briefing to the chief executive, the accreditation manager, and other staff as selected by the candidate program. The purpose of the exit briefing is to inform the chief executive, program director, and/or accreditation manager about the findings and observations of the assessor team and to confirm agreements on “after-the-fact” documentation needed to complete proofs of compliance, if necessary. Such supplemental documentation must be submitted to EMAP within 30 days of the last day of the on-site assessment if it is to be considered for the

assessment report that will go to the Program Review Committee. Any such agreements will be committed to writing and made part of the assessment report. The assessor team leader will conduct the interview and outline the assessment findings, the assessment report process, and the process for committee review.

The exit briefing is an opportunity to verbally outline assessors' findings. However, assessors refrain from assuring candidate personnel that the program is in compliance in any particular area or promising accreditation, since preparation of the assessment report, committee review and commission decision must be accomplished before an accreditation determination is known. Care must be taken to communicate areas of non-compliance by tying them to the language of the *EMAP Standard*. During this period, corrective actions to achieve future compliance in a deficient area can be discussed with the program manager and/or accreditation manager. It is also a good time to point out any exemplary work that has been found during the assessment and to discuss referring such practices to EMAP so that they might be shared with other programs.

The assessor team leader should prepare the assessor team for possible disagreement that may occur during the exit briefing, especially if there are areas of noncompliance. This should not be the first indication that the program is non-compliant, as this feedback should be provided to the accreditation manager as the assessment progresses. Nonetheless, it is the responsibility of the assessor team leader to explain the rationale of the assessor team in a non-confrontational manner. Examples of corrective steps may be provided by the assessor team leader but must not be communicated as specifically required or as a guaranteed means of meeting the standard.

If the chief executive or accreditation manager is dissatisfied with the findings of the assessor team, the assessor team leader should explain the steps for responding through the assessment report process. A copy of the assessor team's assessment report, prepared after conclusion of the on-site assessment, will be provided to the candidate before it is considered by the Program Review Committee. The candidate will have the opportunity to submit comments in response to findings in the report, if desired. The Program Review Committee will consider the program's response in its review.

It is important that the assessor team and the candidate understand that the team's assessment report records and presents the team's findings as to whether the candidate met each standard, with explanations based on documentation provided in the self-assessment and the on-site assessment. It should be noted that the Program Review Committee will review the assessment report and supporting documentation and make a recommendation regarding accreditation to the EMAP Commission, which will decide accreditation status.

At the end of the exit briefing, the chief executive and/or the accreditation manager is given the opportunity to provide feedback to the assessor team leader concerning

the standards, assessment process, and the manner in which the assessor team conducted its business. The candidate accreditation manager and/or chief executive will be provided evaluation forms to solicit feedback on the assessment process. Candidate evaluation summaries will be provided to the assessor team leader as well as to the Assessment Committee and Standards Committee to improve the process, assessor roles, and the *EMAP Standard*. Each member of the assessor team is also asked to complete an evaluation form.

Guidance on Providing and Receiving Feedback

The open and candid exchange of information is critical to the success of the on-site assessment. The accreditation manager and the chief executive are likely to be interested in learning whether the program is in compliance with the EMAP standards and if they are not, where the program was found deficient.

In providing feedback to the chief executive, accreditation manager, and other program staff, care must be exercised to focus specifically on the EMAP standards in word and spirit and not on personal standards, methods, or individual expectations of assessors. Clear descriptions of why the candidate is not in compliance with a standard must be given. Disappointment on the behalf of a candidate concerning non-compliance is normal, but it is likewise expected that the candidate will be concerned about how its program can be quickly brought into compliance. While assessors may provide suggestions regarding corrective or other actions, they must not suggest or guarantee that taking certain steps will lead to compliance or accreditation.

Section VII. Standards Compliance and Assessor Findings

This section describes how assessors determine whether a program is in compliance with EMAP standards and how to document the results of that determination.

The *EMAP Standard*

The *EMAP Standard* (September 2004), which includes 58 (was 54 in the September 2003 edition) individual standards, was developed by collaborative effort of several working groups building upon the foundation of the NFPA 1600 Standard on Disaster/Emergency Management and Business Continuity Programs, 2004, and adding to them from experience and review of other materials.

The *EMAP Standard* is an evolving document. Any request for clarification or correction should be made to the EMAP Standards Committee for recommendation to the EMAP Commission. The *EMAP Standard* avoids prescribing “how” a standard is to be met; rather the focus is on whether the standard has been complied with.

Standards Structure

Each of the standards in the *EMAP Standard* consists of two elements: the NFPA 1600 numbered statement, which appears in light text and additional EMAP explanatory language, which is in regular text. These two parts taken together constitute the accreditation standard for a given program element. For example:

4.1: Program Administration. The entity shall have a documented program that defines the following:

- (1) Executive policy including vision, mission, statement, and enabling authority*
- (2) Program goals and objectives*
- (3) Program plan and procedures*
- (4) Applicable authorities, legislation, regulations, and/or industry codes of practice*
- (5) Program budget, project schedule, and milestones*

The Emergency Management Program (“program”) is institutionalized and documented in a program planning document or documents. The program plan, sometimes referred to as an administrative plan, explains the source of authority to execute the components of the program and explains when the authorities are active. The plan explains how the vision, mission, goals and objectives of the program support those of the parent organization. Where available, industry codes of practice are used to determine appropriate and best practices. The plan outlines relevant program policies and procedures that are pertinent to those governed by the program and explains the source of funding and normal budget levels that ensure program continuity and viability.

In interpreting the standard, the NFPA language and additional language are read together as a requirement.

Standards with Multiple Requirements

In situations where an EMAP standard includes multiple requirements, each item must be identified for proof of compliance and documented accordingly as with any standard. For example, proofs of compliance must be provided for items (a) through (e), as well as for the rest of the text in the standard, in the example below.

5.3.3 The entity shall conduct an impact analysis to determine the potential for detrimental impacts of the hazards on conditions including, but not limited to, the following:

(1) Health and safety of persons in the affected area at the time of the incident (injury and death)

(2) Health and safety of personnel responding to the incident

(3) Continuity of operations

(4) Property, facilities, and infrastructure

(5) Delivery of services

(6) The environment

(7) Economic and financial condition

(8) Regulatory and contractual obligations

(9) Reputation of or confidence in the entity

For purposes of EMAP, impact analysis is synonymous with consequence analysis. For items 1 and 2, the program shall consider both short- and long-term impacts. Item 9 refers to the impact of identified hazards on the public's confidence in the program.

Documentation of Compliance

The candidate will have organized its documentation of compliance with the standards in a series of files, binders, or stacks. The candidate is given guidance in the *Candidate's Guide to Accreditation* on how to prepare its documentation to facilitate review by the assessor team. Documentation will be organized by numbered standard and will contain information that documents the work of the accreditation manager and program staff.

Determining Compliance

Generally, it is up to the candidate to determine how compliance with the *EMAP Standard* will best be demonstrated. The candidate program is asked to provide in the Online Assessment Tool or on the PCR an explanation for how each of the proofs of compliance listed supports or demonstrates compliance. The candidate must produce proof of compliance that is deemed adequate by the assessor team that the program has complied with the written word and meaning of each standard.

Assessors will remain objective about how the program proof of compliance is demonstrated. Assessors record their review of compliance materials provided by the candidate or compliance efforts observed by the assessor using the Online Assessment Tool and/or Proof of Compliance Record (PCR) forms prepared by the candidate program.

Proofs of Compliance

The candidate program will provide in the Online Assessment Tool PCR report a list of items to document compliance with each standard. Assessors use the Online Assessment Tool to record their findings for each standard with explanation of the basis for the compliance findings. Written documentation is the appropriate primary documentation. Interviews and observations clarify, verify, and support written documentation.

- 1. Written documentation:** Written evidence of policies, procedures, rules, regulations, directives, orders, memoranda or other guidance and direction to program personnel about how the program is to be conducted are good examples of written documentation that shows compliance with standards. Other examples would include records, logs, reports, files, financial reports, ledgers, budgets, training records, photographs, after action reports, operational forms and other written visual forms of evidence. Assessors will review the documents and compliance will be documented in the Online Assessment Tool.
- 2. Interviews:** Written documentation should be clarified, supplement, and/or verified through interviews with program personnel. The program should identify key individuals for assessors to interview. For example, interviews may be appropriate in association with exercise or training activities and their relative effectiveness. Interviews are coordinated by the accreditation manager and the assessment team leader and scheduled during the on-site assessment. The candidate should list in the Online Assessment Tool each interviewee's name, title, contact information, and relevance to the standard in question.
- 3. Direct Observations:** Generally, observed compliance by an assessor extends to the existence of materials, supplies, equipment, facilities, and other tangible items not directly supported by written evidence. Other examples would be the demonstration of performance of equipment or systems, such as warning sirens or recording equipment. Assessors will record observations in the Online Assessment Tool.

As assessors review proofs of compliance, they record their findings in the Online Assessment Tool. They may consult with other assessors and with program personnel as needed to clarify questions. In the tool, assessors include notations of both the information gleaned from written proofs of compliance, from interviews, and from observations, and provide analysis of how all the material reviewed demonstrates or does not demonstrate compliance. Assessors also may keep additional handwritten or electronic notes, which they should retain after the on-site assessment until the assessment report is complete. Assessors' entries into the Online Assessment Tool will provide notes in preparation for the exit briefing and will be used by the assessor team leader to create the draft assessment report (*see section on Recording Assessor Findings, page 20*).

“Draft” Documents

In the summer of 2003 meeting, the EMAP Commission approved the following statement regarding assessor review of compliance documentation that is marked or otherwise recognizable as “draft” or “working draft”.

If a document is submitted for compliance, the document can be considered in determining compliance with standards requirements only if the document in question has been approved or otherwise authorized for use in accordance with the program’s policy/protocol regarding promulgation or approval of that type of document. This includes documents marked “draft” or otherwise recognized as “draft”, “working draft”, or other similar interim status, meaning there must be written evidence that the document has been accepted or authorized and distributed for use pending completion of the promulgation/approval process.

If a program does not have a policy or procedure for promulgation or approval of plans or other documents, assessors will consider the following factors in determining whether to consider “draft” or competing documents in determining compliance:

- ✍ the length of time a document has been "draft" (just created? ever implemented?)
- ✍ how widely known and accepted the document or procedure is
 - is there documentation showing approval or recognition as operating document?
 - is there documentation showing distribution, dissemination, exercise?
- ✍ what is the process utilized by the program for policy development, including review and vetting?; is there documentation of status of that process?; has it been followed and completed?

Recording Assessor Findings as to Compliance

A key role of an assessor is to serve as a factfinder during the on-site assessment at a program’s location. This includes recording the assessor’s findings as to compliance/non-compliance and an explanation of the basis for the finding. Findings should also include salient details that provide an understanding of the status of the program as to each standard.

When entering findings in the online assessment tool, assessors should include, at a minimum:

- ? In “Written” section: Notes including titles or description of documents reviewed and key elements or compliance issues related to the documents;

- ? In “Interviews” section: Titles or names of any key interviews and substance or detail from interviews, particularly if key to determining or verifying compliance.
- ? In “Observations” section: Description of things observed that added to understanding/determination of compliance
- ? Select compliant or non-compliant button/box.
- ? In “Assessors Findings/Comments”:
 - o Summary of why program is compliant or non-compliant with the standard.
 - o Tie to standard language;
 - o Must be more substantive than “a review of documentation provided demonstrated compliance” or similar;
 - o Refer to proofs of compliance that formed the basis of finding;
 - o Include details of aspects of the program related to the standard;
 - o Most standards include multiple parts; note parts of the standard that are met/not met.
 - o Should avoid repeating explanation language verbatim for standards in the same section; make it clear that each standard has been addressed independently.

Supplemental Compliance Findings

When an assessor is asked to review supplemental compliance documentation (after on-site assessment), those findings/explanations should be entered into the Online Assessment Tool as an addition to what was entered during the on-site assessment. An Assessor should not delete or revise the findings entered on site but should add a date notation to distinguish review of supplemental materials.

As the team leader prepares the draft assessment report, it is preferable for assessors to have included more detail rather than less while they were on-site, as it is difficult to remember what the team saw once everyone returns to their home location. Collecting and recording adequate detail while on site reduces the amount of follow-up and additional work that assessors and the assessor team leader need to do after the on-site assessment.

Section VIII. Preparing the Assessment Report

Following the on-site assessment, the assessor team will focus on the organization and preparation of the documentation necessary to write the assessment report for the Program Review Committee and EMAP Commission. The assessor team leader will be responsible for assembling input from the assessor team members and compiling the assessment report with assistance from other team members.

The purpose of the assessment report is to convey the findings of the assessor team regarding the candidate's compliance with the EMAP standards to the Program Review Committee and the EMAP Commission.

Compiling Assessor Findings

The assessor team leader is responsible for drafting the assessment report, so the assessor team leader will give continual attention to the work of the assessor team at the candidate's location to ensure that all procedures are followed with respect to documentation of findings, as this documentation will serve as the basis for drafting the report.

The assessor team leader and the assessor team will collect and assemble all forms and documents on site, using the program's Online Assessment Tool results and/or PCRs as reference. The assessor team leader will review all of the assessor team worksheets, forms, and documents as the assessment progresses to ensure that the process is on track and to avoid last minute discoveries that might impair preparation of the assessment report.

The EMAP Standard Documentation Files will be maintained in an orderly fashion to facilitate review, and any original documents used for validation of compliance must be kept separate from working documents to avoid accidental loss, destruction or intermingling with assessor records. Documents should be copied and the original returned to its source files whenever possible and practical. Documents may not be retained by the assessor team as part of the accreditation files.

Supplemental Compliance Materials

In cases where additional documentation is required to be to be furnished after completion of the on-site assessment, the accreditation manager is responsible for providing copies or noting if materials furnished are originals so that they may be returned. The assessor team leader will review all documentation removed from the site to ensure that the assessor team is taking no program documents.

If information necessary to complete the assessment is unavailable for review by the assessor team, the assessor team leader will inform the accreditation manager that the program may provide such proofs within 30 days from the last day of the on-site assessment.

The Assessment Report

The assessor team leader will prepare a first draft of the assessment report within 15 days of the completion of the on-site assessment or receipt of required supplemental materials and provide a copy to the EMAP office and to assessor team members. The intended audience for the report is the Program Review Committee and the EMAP Commission.

Assessors must provide enough detail in the assessment report indicate why the program was found to be in compliance or not in compliance with each standard. In most cases, multiple documents and materials, and possibly interviews, will be considered in making the determination. A short explanation or analysis of key facts, aspects, or features on which compliance/non-compliance was based is needed for each standard. These explanations are created by assessors as they determine their findings during the on-site assessment.

Care should be taken to prepare the report so that it can be reviewed by any objective audience, including the general public, if it were released by the candidate program. Due to the sensitive nature of the information, care should be taken to preserve the security of the information for the intended audience: the commission and the candidate. After review and revision by the assessor team, the report will be submitted, approximately 60 days after the last day of the on-site assessment, to the EMAP Program Review Committee and a copy furnished to the candidate's accreditation manager. The report, the candidate file, and any response by the candidate will be considered at the next meeting of the Program Review Committee.

For state/territorial baseline assessments in 2003 and 2004, a copy of the assessment report also will be provided to FEMA/DHS.

A sample format for the assessment report is provided on page 26.

Section IX.

EMAP Assessor and Committee Member Code of Conduct

The value of accreditation depends to a large degree upon the work and credibility of the EMAP Commission, committee members and assessors. To be meaningful, the accreditation process must be conducted with maturity, respect, objectivity, diplomacy and dedication. All EMAP representatives must project a demeanor of professionalism in conduct and appearance and must respect the confidential nature of the task. Contributing to successful service as an EMAP representative are: initiative, expertise, cooperative spirit, flexibility, analytic approach, and tact. EMAP representatives refer to commission, committee, assessors and any individual affiliated or contracting with EMAP.

Following are guidelines to be acknowledged and followed by all EMAP representatives.

I. Knowledge

A. EMAP representatives have sufficient training and experience in emergency management and the interest/ability to maintain updated knowledge regarding issues and practices in emergency management. Assessors may be generalists or subject-matter experts who are practitioners within the field of emergency management. They have a thorough understanding of emergency management principles and the *EMAP Standard* and have successfully completed EMAP Assessor Training.

II. Appropriate Roles

A. EMAP representatives must assume this responsibility conscientiously, recognizing and putting aside personal and organizational biases and needs. Documentation presented is to be analyzed in relationship to the EMAP Standard rather than in comparison to personal convictions or practices.

B. EMAP representatives should not interact with candidate program personnel except in a manner and to a degree that does not compromise the integrity and credibility of the assessment and accreditation process.

C. EMAP representatives must refrain from consulting or advising on accreditation preparation, corrective actions, follow-up, or related subjects with applicant or candidate programs for a minimum of 12 months in advance of or following an on-site assessment.

D. EMAP representatives must respect candidate program personnel and avoid exploiting their position to develop personal or business relationships.

III. Confidentiality

A. EMAP representatives must respect the confidential nature of applicant program materials and refrain from revealing confidential information to any individual who is not part of the assessor team, except as required to fulfill their role as assessors.

B. EMAP representatives must respect the value and possible confidential nature of materials they review in the accreditation process. During an assessment, it is not acceptable to collect or remove materials for use in other programs. This does not preclude the assessor from requesting such materials directly from the program after the onsite assessment and final assessment report is completed.

IV. Conflict of Interest/Bias

A. EMAP representatives serve on teams only where they are able to serve objectively and without bias. Representatives will recuse themselves from teams for candidate programs with which they have a relationship or history (e.g., former employee/employer or contractor of program or program personnel, relative of program personnel). This means a representative will make EMAP aware of a potential conflicts of interest or bias and will not serve on a team assessing that program. While professional acquaintances will be difficult to avoid, it is expected that assessors will use good judgment in evaluating real as well as perceived conflicts of interest that could taint the credibility of the assessment process.

B. EMAP representatives will not use their position for promoting agendas other than the assessment, i.e.: -- recruitment of personnel or offering his/her own services to the program.

C. EMAP representatives will not accept gifts or items from a candidate program or its personnel, unless such item would be offered to any other visiting emergency manager.

Signature

Date

Name (type or print)

Section X. Glossary

The following terms are used throughout the EMAP program documents and are intended to simplify and clarify the documents. They are not intended to supercede or redefine the *EMAP Standard*.

Accreditation is a voluntary, non-governmental process of self-study and external review designed to evaluate, enhance, and publicly recognize quality in a particular type of program.

Accreditation/Assessment Manager is the candidate staff member or representative who serves as the point of contact between the assessor team and program. The manager coordinates the administrative aspects of performing the self-assessment, obtains and documents evidence of compliance with EMAP standards and other scheduling and oversight activities.

Assessment is an evaluation of a candidate's program against established standards with a consistent methodology.

Assessment Committee is a committee of volunteers appointed by the EMAP Commission responsible for on-site assessment materials, assessor training, and maintenance of a cadre of assessors.

Assessment report is a summary of the findings of the assessor team submitted to the EMAP Program Review Committee for review and accreditation recommendation.

Assessor cadre is a pool of pre-qualified assessors who may be assigned to an assessor team.

Assessor team is a team of three to eight emergency managers from jurisdictions outside the applicant program who volunteer to serve as peer reviewers and on-site evaluators of the applicant program.

Candidate is an entity or program applying for accreditation.

Certification is granted to individuals rather than programs. For example, IAEM provides the Certified Emergency Manager (CEM) certification for qualified individuals.

EMAP is the Emergency Management Accreditation Program, a voluntary, non-governmental program, created through collaboration of more than a dozen national groups, to provide a system for assessment and external review for state and local government emergency management programs.

EMAP Commission is the 10-member governing body of the Emergency Management Accreditation Program. It makes policies decisions regarding EMAP and determines accreditation status of candidate programs. It also appoints members of EMAP committees. Its members are appointed by the International Association of Emergency Managers and National Emergency Management Association (five members each) in accordance with categories set out in the EMAP Accreditation Process Guide.

EMAP Standard is the set of criteria an emergency management program must meet to be accredited. Each numbered subsection of chapters 2 and 3 is a "standard".

There are 58 in the *EMAP Standard* (Standards 5.1.1 and 5.1.2 are not counted since they are general and cumulative in applying all the standards in Chapter 5).

Emergency Management Program. A jurisdiction-wide system that provides for management and coordination of mitigation, preparedness, response and recovery activities for all hazards. The system encompasses all organizations, agencies and individuals responsible for emergency management and homeland security.

On-site assessment is an on-location assessment at the site of the program by the assessor team to determine compliance with accreditation standards using documentation review and verification, interviews, observations.

Peer review is the act of undergoing critique or evaluation by an individual or individuals who work in the same profession or industry.

Program Review Committee is a committee of volunteers appointed by the EMAP Commission responsible for considering programs that have applied for accreditation and been reviewed by an assessor team. The committee reviews the assessment report and makes a recommendation regarding accreditation status to the EMAP Commission.

Registered program is a state or local emergency management program that has paid the EMAP registration fee of \$125 U.S. to receive EMAP application and assessment materials.

Standards Committee is a volunteer committee appointed by the EMAP Commission responsible for developing new or revised language for EMAP standards and related materials.

Section XI. Outline of Assessment Report

Assessment Report

(Name of Accreditation Candidate Program)

Program Address:

Director of Program:

Accreditation Manager:

Members of Assessor Team:

Dates of On-Site Assessment:
(schedule included as appendix)

Purpose of EMAP Assessment

Compliance at-a-glance (chart showing compliance in 14 program areas)

For each standard (numbered subsection) in the *EMAP Standard*, the site assessment report, at a minimum:

- ✍ Provides descriptive and explanatory information sufficient to provide EMAP an adequate picture of this aspect of the program.
- ✍ States clearly the program's compliance or noncompliance status for the standard and the basis for that finding.
- ✍ Describes any unique or notable aspects of the program that affect the program's activities or capabilities in relation to this standard.
- ✍ Notes any exemplary practices.